

AO 435 (Rev. 04/11)		Administrative Office of the United States Courts			<b>FOR COURT USE ONLY</b>	
<b>TRANSCRIPT ORDER</b>					<b>DUE DATE:</b>	
<i>Please Read Instructions:</i>						
1. NAME <b>Marianne Dugan</b>		2. PHONE NUMBER <b>(541) 338-7072</b>		3. DATE <b>2/13/2014</b>		
4. MAILING ADDRESS <b>259 E. 5th Ave., Ste 200-D</b>		5. CITY <b>Eugene</b>		6. STATE <b>OREGON</b>	7. ZIP CODE <b>97401</b>	
8. CASE NUMBER <b>11-cv-06282-MC</b>	9. JUDGE <b>McShane</b>	DATES OF PROCEEDINGS				
		10. FROM <b>9/15/2011</b>		11. TO <b>12/12/2013</b>		
12. CASE NAME <b>Reynaga v. Roseburg Forest Products</b>		LOCATION OF PROCEEDINGS				
		13. CITY <b>Eugene</b>		14. STATE <b>OREGON</b>		
15. ORDER FOR						
<input checked="" type="checkbox"/> APPEAL		<input type="checkbox"/> CRIMINAL		<input type="checkbox"/> CRIMINAL JUSTICE ACT		<input type="checkbox"/> BANKRUPTCY
<input type="checkbox"/> NON-APPEAL		<input type="checkbox"/> CIVIL		<input type="checkbox"/> IN FORMA PAUPERIS		<input type="checkbox"/> OTHER
16. TRANSCRIPT REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested)						
PORTIONS		DATE(S)		PORTION(S)		DATE(S)
<input type="checkbox"/> VOIR DIRE				<input type="checkbox"/> TESTIMONY (Specify Witness)		
<input type="checkbox"/> OPENING STATEMENT (Plaintiff)						
<input type="checkbox"/> OPENING STATEMENT (Defendant)						
<input type="checkbox"/> CLOSING ARGUMENT (Plaintiff)				<input type="checkbox"/> PRE-TRIAL PROCEEDING (Specy)		
<input type="checkbox"/> CLOSING ARGUMENT (Defendant)						<b>NO TRANSCRIPTS ARE BEING ORDERED</b>
<input type="checkbox"/> OPINION OF COURT						
<input type="checkbox"/> JURY INSTRUCTIONS				<input type="checkbox"/> OTHER (Specify)		
<input type="checkbox"/> SENTENCING						
<input type="checkbox"/> BAIL HEARING						
17. ORDER						
CATEGORY	ORIGINAL (Includes Certified Copy to Clerk for Records of the Court)	FIRST COPY	ADDITIONAL COPIES	NO. OF PAGES ESTIMATE		COSTS
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HOURLY	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES			
REALTIME	<input type="checkbox"/>	<input type="checkbox"/>				
CERTIFICATION (18. & 19.) By signing below, I certify that I will pay all charges (deposit plus additional).				ESTIMATE TOTAL		0.00
18. SIGNATURE <b>s/ Marianne Dugan</b>				PROCESSED BY		
19. DATE <b>2/13/2014</b>				PHONE NUMBER		
TRANSCRIPT TO BE PREPARED BY				COURT ADDRESS		
ORDER RECEIVED		DATE	BY			
DEPOSIT PAID				DEPOSIT PAID		
TRANSCRIPT ORDERED				TOTAL CHARGES		0.00
TRANSCRIPT RECEIVED				LESS DEPOSIT		0.00
ORDERING PARTY NOTIFIED TO PICK UP TRANSCRIPT				TOTAL REFUNDED		
PARTY RECEIVED TRANSCRIPT				TOTAL DUE		0.00

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